

DRIVING SAFETY COURSE AFFIDAVIT

YOUR NAME_____ Case Number_____
(Print Full Name)

TDL Number_____

TO THE HONORABLE COURT:

Attached please find,

- ☐ the Certificate of Completion (Court’s copy)
- ☐ my certified copy of my Texas Driving Record which indicates that I had not completed an approved Driving Safety Course or Motorcycle Operators Training Course, as applicable, within 12 months preceding the date of this offense.

I further swear or affirm I was not taking a Driving Safety Course or Motorcycle Operators Training Course, as applicable, on the date the request to take the course was made, and had not completed such a course that is not shown on my driving record within the 12 months preceding the date of the offense.

Defendant: _____
Signature Required – Do Not Print

THE STATE OF TEXAS
COUNTY OF_____

BEFORE ME _____, on this day personally appeared _____, known to me to be the person who subscribed and swore to the foregoing instrument.

GIVEN UNDER MY HAND AND SEAL OF OFFICE THIS ____day of _____, A.D., 200____.

My commission Expires: _____ Notary Public: _____
_____ Date:_____

CITY OF HOUSTON
COUNTY OF HARRIS
STATE OF TEXAS

I, _____, hereby certify that on this day personally appeared _____, known to me to be the person who swore to the foregoing instrument.

Witness my official hand and seal of office this ____ day of _____, A.D., 200____.

Municipal Court Clerk